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CONFIRMATION NO. 6495

<b>SERIAL NUMBER</b> 10/526,152	<b>FILING OR 371(c) DATE</b> 02/24/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 71707
<b>APPLICANTS</b> Gianfranco De Paoli Ambrosi, Salo (Brescia), ITALY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IT03/00530 09/02/2003				
<b>** FOREIGN APPLICATIONS *****</b> ITALY BS2002A000078 09/02/2002				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>Robert H. Thompson</i> Initials <i>RHA</i>	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 19  <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23872				
<b>TITLE</b> Composition based on triethyl citrate for the treatment of bacterial infections of the skin				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	